

# PUBLIC SCHOOLS OF CHICAGO DURING INFLUENZA EPIDEMIC, 1918.

H. O. JONES, M. D.  
*Dept. of Health, Chicago, Ill.*

Discussion before the American Public Health Association at the Meeting at Chicago, December 10, 1918.

**I** RESPECTFULLY submit the following report of Chicago's experience during the recent influenza epidemic with reference especially to the public and parochial schools:

With the spread of the influenza epidemic and the threatened outbreak of this disease in Chicago the question as to whether or not the public and parochial schools in which about 500,000 children assemble daily should be closed was a serious problem, especially so, since in many other cities a precedent of closing schools had been established.

A conference of prominent representatives of the various agencies actively interested in the children's welfare was called September 28 by the commissioner of health, and the question of closing schools was thoroughly debated. It was noted that the sanitation in our schools is uniformly good and that the hygienic conditions of environment are better in schools than those which obtain among the children when classes are discontinued. When in school the children are under the observation of doctors, nurses and teachers, while on the outside there is no limit to their possible contact, under conditions in which this supervision is lacking. The consensus of opinion was in favor of keeping the schools open for the following reasons:

1. A better knowledge of existing conditions would be acquired when the schools were made a source of information as to sickness among the children and their families.

2. It would be possible to supervise the children and keep many of them

under better environment during the school hours than if they were allowed to stay at home and run in streets and alleys, or play on premises where persons sick with the disease are domiciled.

3. Because we have an organized staff of physicians and nurses for medical inspection of schools.

Having decided to keep the schools open plans were formulated to increase the safeguards of the children as far as possible.

The superintendent of schools was requested to arrange that the classrooms be so heated as to permit thorough frequent flooding of all rooms with fresh air, without chilling the children, and that the rules against dry sweeping be strictly enforced in the school buildings. These requests were made and complied with because it was agreed that fresh air and freedom from dust, the avoidance of chilling and everything that tends to reduce vitality were primary requisites in combating influenza.

With the increasing prevalence of the epidemic another letter was sent to the superintendent of schools requesting that all classrooms in all schools be made open-window rooms, that is that windows remain open all the time in all the rooms, heat being supplied and the children being permitted to wear their street wraps to avoid any possible chance of becoming chilled. The object of this last request which was complied with was to supply the maximum of fresh air.

In addition to these measures the routine medical work in schools was discontinued and the staff of physicians and

nurses concentrated on inspection of school children for contagious diseases, especially influenza. The staff excluded all children found having any signs of the disease or prodromal symptoms; and all children coming from a home where there was a case of influenza. Teachers made inquiry each morning for any pupils not feeling well and referred such children to the school doctor for an examination. All absentees were subject to a rigid inspection and examination before being permitted to reënter school.

The school health officers and nurses visited the homes of as many absentees as possible and where sickness was found they instructed the families as to the proper isolation of the patient and the care and protection of themselves. They notified the Department of Health of influenza cases found and also reported when they discovered a family that needed medical assistance or relief.

During the month of October approximately 300,000 inspections of school children were made by the school physicians. During the epidemic the nurses made 30,000 house calls.

A study of the absentees by days during the period October 4 to November 12

shows that the peak of absences occurred at the time when the epidemic was at its height. Absentees averaged about 25 to 30 per cent for this period—the north-west and south side being affected about equally.

The home calls showed that absence of pupils was only in part due to illness of the children, some was due to illness or death in the family and some to the voluntary keeping of children from school by parents for fear of contracting the disease.

An analysis of 15,000 reported cases shows about 14 per cent occurred in children under eighteen years of age. An analysis of the mortality from influenza and pneumonia by school age groups during the period September 22 to November 12 is as follows:

Ages	Influenza	Pneumonia
5 to 10	5.29%	4.46%
10 to 15	2.55%	2.67%
15 to 20	4.31%	3.55%

We believe that in view of the results just noted that the decision of keeping the schools of this city open during the recent influenza epidemic was justified.

